T TELEVISION TELEVISION RECORD										App App	ess it displays a valid OMB control number Application of Docket Number		
	Substitute for Form PTO-875									10/60376			
CLAIMS AS FILED - PART ((Column 1) (Column 2) SMALL ENTITY											OTHER THAN		
	(000,000)							SMAL	L ENTITY	اب	SMA	LL ENTITY	
	FOR NUMBER FILED NUMBER EXTRA						_	RATE	. FEE		RATE	FEE	
-	(37 CFR 1.16(a)) TOTAL CLAIMS							. "	1	OR		1.	
4	(37 CFR 1.16(C) minus 20 = +				7	X \$ =		7		 ' -			
(3	IDEPENDENT CL 7 CFR 1.16(b))	minus 3 =				7	X \$=		OR	X 5			
M	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))									OR	X \$=		
										OR	+5=	.:	
Ι΄	• If the difference in column 1 is less than zero, enter *0" in column 2.									OR	TOTAL		
j	. ^	CLAIM	S AS AN	NENDE	D - PARTII								
0	-1-06	. (Cc	olumn 1)	•	(Column 2)	(C=1 a)	•			00	OTHE	R THAN	
~			LAIMS	Т	HIGHEST	(Column 3)	7 1	SMALL	ENTITY	OR ¬		LENTITY	
L		1	MAINING AFTER ENDMENT		NUMBER PREVIOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI-	
M	Total (37 CFR 1,16(c))	1:	15	Minus	PAID FOR	====	1 }		FEE	4	 	TIONAL FEE	
AMENDMENT	Independent (37 CFR 1.16(b))	1.7	/うー	Minus	1110	=	} }	x s=		OR	x s=		
Ä	(37 G.K.1.140))		_	<u> </u>	上		1	X \$ =	-	OR	x s =		
	FIRST PRESEN	TATION (OF MULTIPL	E DEPENC	ENT CLAIM (37 (OFR 1,16(d))	ΙL	+ s =		OR	+s =		
				•	•			TOTAL ADD'L FEE	1	OR	TOTAL	11-	
		(Col	uma 1)		(Column 2)	(Column 3)			·	, -	ADD'L FEE		
AMENDMENT			AIMS AINING		. HIGHEST NUMBER	PRESENT	[0475	<u> </u>	l	F		
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	Total (37 CFR 1.16(c))	•		Minus	**	=			FEE			FEE	
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¥	FIRST PROSEIN	La Norro			ENT CLAIM (37 CI	J	×	<u> </u>		OR	X \$=		
		- no c	- 600111/12	DEPENDE	INT CLAIM (37 CI	'R 1 15(C);		S =		OR	+ s =		
								OTAL DO'L FEE		OR	TOTAL ADD'L FEE		
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.		-	AIMS AIMING		· HIGHEST NUMBER	PRESENT		DATE		1	7		
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MEN	Total (37 CFR 1.16(c))	•		Minus	•	=	-		FEE	ł		FEE	
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	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR + 16(0))							<u></u>		OR	x s=		
				OCTENUE!	NI CUAIM (37 CF)	R 1 16(d))	+	S=		QR	+ s =		
	If the entry in co	dumn 1 e	s less than	Ilia ante :	in column 2, wate		AC	WILFEE		OR	TOTAL ADO'L FEE		
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					N THIS SPACE IS		er *3*.					ł	

The Fighest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.